

**DECLARATION FOR  
UTILITY OR DESIGN  
PATENT APPLICATION  
(37 CFR 1.63)**

Declaration  
Submitted  
with Initial  
Filing

Declaration  
Submitted after Initial  
Filing (surcharge  
(37 CFR 1.16 (e))  
required)

OR

**COMPLETE IF KNOWN**

Application Number	10/554,312
Filing Date	10/21/2005
Group Art Unit	
Examiner Name	

As a below named inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**QUANTUM TUNNELLING TRANSDUCER DEVICE**

(Title of the invention)

the specification of which

is attached hereto  
OR

was filed on (MM/DD/YYYY) 10/21/2005 as United States Application Number or PCT International Application Number 10/554,312 and was amended on (MM/DD/YYYY) \_\_\_\_\_ (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT International application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Numbers	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? YES	Certified Copy Attached? NO
			<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

**Burden Hour Statement:** This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Under the Paperwork Reduction Act of 1995, no person is required to respond to a collection of information unless it contains a valid OMB control number.

## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT International application designating the United States of America, listed below and, insofar as the subject matter of such of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT International filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
PCT/AU2004/000523	04/22/2004	

Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:  Customer Number 09355  
OR

Registered practitioner(s) name/registration number listed below.

Name	Registration Number	Name	Registration Number

Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to:	<input checked="" type="checkbox"/> Customer Number or Bar Code Label <u>09355</u>	OR	<input type="checkbox"/> Correspondence address below
-------------------------------	---	----	---

Name	Jacqueline E. Hartt		
------	---------------------	--	--

Address	Allen, Dyer, Doppelt, Milbrath & Gilchrist, P.A.		
---------	--	--	--

Address	255 South Orange Avenue, Suite 1401 P.O. Box 3791		
---------	--	--	--

City/State/Zip	Orlando, Florida 32802-3791		
----------------	-----------------------------	--	--

Country	US	Telephone	(407) 841-2330	Fax	(407) 841-2343
---------	----	-----------	----------------	-----	----------------

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor  A petition has been filed for this unsigned inventor.

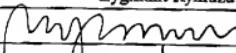
Given Name (first and middle — [if any])	Family Name or Surname
--	------------------------

**Marek Michalewicz**

Inventor's Signature	<i>M. T. Michalewicz</i>		Date	<u>25 JULY 2005</u>
Residence	West Footscray,	Country	Australia	Citizenship
Post Office Address	C/65 Alma Street			
City/State/Zip	West Footscray, VIC 3012	Country	Australia	

Additional inventors are being named on the \_\_\_\_\_ supplemental additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

<b>DECLARATION</b>		<b>ADDITIONAL INVENTOR(S)</b> Supplemental Sheet
--------------------	--	---

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor.		
Given Name (first and middle — if any)		Family Name or Surname		
Zygmunt Rymuza				
Inventor's Signature				Date 7/29/2006
Residence	Warsaw	Country	Poland	Citizenship Polish
Post Office Address	c/o Dept. of Mechanotronics, Technical University of Warsaw, ul. Sw.A.Boboli 8, p.719			
City/State/Zip	Warsaw	Country	Poland	